

REPRINT REQUEST FOR IRS FORM W-2

Please reissue a WAGE AND TAX STATEMENT (Form W-2) for the following employee, for the tax year _____.

Please print

EMPLOYEE NAME: _____

SOCIAL SECURITY # (Last 4 Digits): XXX-XX- _____

EMPLOYEE **CURRENT** MAILING ADDRESS:

Street Address _____

City _____ State _____ Zip Code _____

Company where employed: _____

The Form W-2 is requested for the following reason:

_____ Never Received
_____ Misplaced or Destroyed
_____ Social Security Number or Name Incorrect (need documentation)
_____ Other – Explain _____

Fax request:

I take full responsibility for my Form W-2 being faxed to _____.

Signature of Employee

Once completed, please return form by:

- Fax: (586) 997-3714
- Mail:

AES
13486 Canal Road
Sterling Heights, MI 48313

If the W-2 is returned to us due to an incorrect address, we will mail the form out once we receive the corrected address at no charge.

There is a \$20.00 fee for reprints of the W-2. Payment must be received before reprint is sent out. Payment must be made by either money order, cashier's check or you can come in a pay by cash. If you are an active employee, we can deduct the \$20.00 from your paycheck to make it easier.